Independent Citizens Redistricting Commission
Application Review and Quality Control Sheet

Applicant Name: _Catherine Setzer Andrews_

Date Received: _2/21/13_   **Applicant Number:** _10338_

Recommended Applicant Pool Status:

☑ Included   ☐ Removed

Final Applicant Pool Status:

☑ Included   ☐ Removed

REQUIREMENTS:

1. Was the application received before the submission deadline?   ☑ Yes ☐ No

   If NO, list time/date application was received: _____

2. Is the application complete?   ☑ Yes ☐ No
   If NO, list the item(s) that need to be completed:

3. Indicate how the applicant responded to the following questions:

   A. Student enrolled in a college/university in the City of Austin?   ☐ Yes ☑ No
      If YES, consider I and ii only; If NO, consider I, ii, iii, and iv:

      i.   Reside in the City of Austin?   ☑ Yes ☐ No

      ii. Registered to vote in the City of Austin?   ☑ Yes ☐ No

      iii. Continuously registered to vote in the City of Austin?   ☑ Yes ☐ No

      iv. Voted in 3 of the last 5 City of Austin general elections?   ☑ Yes ☐ No

❖ **Follow-up needed related to REQUIREMENTS?**   ☐ Yes ☑ No
   If YES, identify issue(s) addressed and disposition:

CONFLICTS OF INTEREST:

4. **Did the applicant respond "Yes" to any conflict of interest questions?**   ☐ Yes ☑ No

   If YES, indicate which question(s):

❖ **Follow-up needed related to CONFLICTS OF INTEREST?**   ☐ Yes ☑ No

   If YES, identify issue(s) addressed and disposition:

CONSISTENCY:

5. **Are applicant answers consistent?**   ☑ Yes ☐ No

   If NO, indicate which answer(s):

❖ **Follow-up needed related to CONSISTENCY?**   ☐ Yes ☑ No

   If YES, identify issue(s) addressed and disposition:

Application Reviewed By: ~~BL~~	*Review Date:* 2/22/13
Quality Control Review By:	*QC Review Date:* 3/1/13
Follow-up Contact(s) Reviewed By:	*Date:*